



# GENETICS SPEAKER REQUEST FORM



Teacher's Name: \_\_\_\_\_ Phone number: \_\_\_\_\_ (work)

School: \_\_\_\_\_ (home)

Address: \_\_\_\_\_  
\_\_\_\_\_

What date(s) do you want the presentation(s)? 1st choice \_\_\_\_\_ 2nd choice \_\_\_\_\_

What time(s) do you want the presentation(s)? 1st choice \_\_\_\_\_ 2nd choice \_\_\_\_\_

How long a presentation do you want? \_\_\_\_\_

What subject area do you primarily teach? \_\_\_\_\_

The students will be from which grade(s)? \_\_\_\_\_

**Which subject area do you want covered? You may select more than one area. We will discuss the topics when we contact you.**

Basic genetic principles

☐

Careers in Genetics

☐

Genetics of common disorders

☐

Government Regulation

☐

Genetic Screening and Testing

☐

Agricultural Genetics

☐

Genetic Discrimination

☐

Other (please specify) \_\_\_\_\_

Ethical and Social Issues

☐

**Do you have any of the following available?**

LCD Projector

☐

Projection Screen

☐

Parking for the Speaker

☐

**PLEASE FAX COMPLETED FORM TO 733-9063 OR MAIL TO:**

741 Sunset Avenue, Honolulu, HI 96816

**THANK YOU**

**If you have questions, please call 733-9055**